

(Last Name Last)

PLEASE TYPE OR PRINT

Ms.

DO NOT DETACH

Address

Mr. Artist KATHLEEN TOTTER-SN

Permanent REMSEN ED.

Street

City

Daytime Tel. 2 6 125 - 8985

Zip

Area Code

Temporary or Studio Address

City

Zip

Daytime Tel. (Area Code

If you do not presently live in one of the counties of the Western Reserve, in which county were you born?

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

Artist will pick up at Museum.

- ☐ Museum should dispose of.
- ☐ Museum should ship to artist at artist's expense to this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information

DO NOT DETACH

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1985 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

KATH	LEEN	TOTTER	SMITH

Name

4454 REMSEN RO.

Address

MEDINA, OHO

44256

City & State

Zip

NOTIFICATION #2

GO NOT . DETACH

□ 1. Paintings □ 2. Graphics

☐ 3. Photography

4. Sculpture 5. Crafts

Title

SUN UP - SUN DOWN

ACCEPTED REJECTED DO NOT WRITE IN THIS SECTION 175(1)

☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Crafts

Title

LUNAR PHASE II

DO NOT WRITE IN THIS SECTION

174(17

ACCEPTED

REJECTED

RETURN OF OBJECTS: **REJECTED: JUNE 4-8**

ACCEPTED: JULY 29-AUGUST 3

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This is your only receipt to claim your object(s).